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Joseph F. Leightn INTERNATIONAL 521 West 57th Stre New York, NY 100	L FLAVORS & FRAC et	FRANCE OG P	E	I hereby certify that the States Postal Service addressed to the Mai	rtificate of Mailing or Trans nis Fee(s) Transmittal is bein with sufficient postage for fir il Stop ISSUE FEE address PTO, on the date indicated bel	g deposited with the United st class mail in an envelope above, or being facsimile
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		TIENT	CACEMARY	June 24	2004	(Date)
APPLICATION NO.	FILING DATE	FIR	T NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/015,367	12/13/2001	Virgil A.G. Williams		ns	IFF-27	2791
TITLE OF INVENTION: G	EL AIR FRESHENER					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300		\$1630	09/15/2004
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FUBARA, BLESSING M		1615		424-076300	_	
Address form PTO/SB/12 "Fee Address" indicatic PTO/SB/47; Rev 03-02 or Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless been previously submittee (A) NAME OF ASSIGNI INTERNATIONAL Please check the appropriate 4a. The following fee(s) are or the state of the state	RESIDENCE DATA TO B an assignee is identified beld to the USPTO or is being s EE AL FLAVORS & assignee category or catego enclosed:	Correspondence tion form e of a Customer E PRINTED ON THE low, no assignee data submitted under separa (B) RI FRAGRANCE ries (will not be printed 4b. Pa	pames of up to agents OR, alternation (having as a agent) and the na attorneys or agent will be printed. PATENT (print of will appear on the te cover. Complet ESIDENCE: (CIT of the cover) of the cover of the cover. Complet esides on the patent); by ment of Fee(s): A check in the ampayment by credit of the Director is his posit Account Number 1988.	patent. Inclusion of a ion of this form is NOTY and STATE OR CONTY AND	ssignee data is only appropria f a substitute for filing an assi UNTRY) York, N.Y. (Uncorporation or other private graduous attached. is attached. is attached. is attached. is arge the required fee(s), or	JSA) oup entity government credit any overpayment, to opy of this form).
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